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WARRINGTON RURAL DISTRICT COUNCIL



# ANNUAL REPORT

ON THE WORK OF THE  
PUBLIC HEALTH  
DEPARTMENT

FOR THE YEAR 1958







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# CONTENTS

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	<i>Page</i>
SECTION I.	
General Description and District Statistics.....	13
SECTION II.	
Vital Statistics .....	14
SECTION III.	
Notifiable Disease Statistics .....	18
SECTION IV.	
Supervision of Food Supplies .....	21
SECTION V.	
Housing .....	25
SECTION VI.	
SANITARY CIRCUMSTANCES OF THE AREA :—	
Water Supplies .....	28
Rivers and Streams .....	28
Drainage and Sewerage .....	29
Public Cleansing .....	30
Salvage .....	32
Rodent Control .....	32
Atmospheric Pollution .....	33
Verminous and Filthy Premises .....	34
Offensive Trades .....	34
Sanitary Accommodation .....	34
SECTION VII.	
Industrial and Commercial Hygiene .....	36
SECTION VIII.	
Public Health Inspectors' Visits .....	38
SECTION IX.	
Local Health Authority and other ancillary Health Services	40
SECTION X.	
The National Assistance Act, 1948 .....	49
SECTION XI.	
The Children Act, 1948 .....	50



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\*—Qualified Inspectors of Meat and Other Foods (R.S.I.).





# WARRINGTON RURAL DISTRICT COUNCIL

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## ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH FOR THE YEAR 1958

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TO THE CHAIRMAN AND MEMBERS,  
WARRINGTON RURAL DISTRICT COUNCIL.

MR. CHAIRMAN AND GENTLEMEN.

I have the honour to submit for your consideration and approval my Report as your Medical Officer of Health on the work of the Health Department of the Council for the year 1958, incorporating therein also information and statistics which relate to the functions of the Local Health Authority under Part III of the National Health Service Act of 1946 insofar as they are exercised within the boundaries of the Rural District by that Authority, and delegated to the Divisional Health Committee under the County Council's scheme of divisional administration of its Health Services.

Consideration of the basic vital statistics reveal a very slight and insignificant fall in the estimated home population to 33,790 as against 33,920 in 1957, a reduction which is almost certainly due to the "run-down" and impending closure of the American Air Force Base at Burtonwood, and a similar state of affairs at the R.A.F. Station at Padgate. It will however be evident that these reductions in the members of service personnel must have been offset very largely by a compensatory increase in the number of civilians residing in the Rural District.

The number of live births has fallen from 528 last year to 485, the "crude live birth rate" from 15·6 to 14·4 per 1,000 of the population, and the adjusted rate from 17·0 to 14·6 per 1,000. A fall also in the "comparability factor" for live births from 1·09 to 1·02 means that a cross section of our population is more nearly approaching the normal distribution in England and Wales as a whole. The crude death rate of 9·6, resulting from the 323 deaths registered, also shews a reduction on 10·8 deaths per 1,000 population derived from the 366 registered deaths in 1957, and the adjusted death rate a fall from 11·4 to 9·2/1,000 being the Registrar General's comparability factor of 0·96, which in itself is lower than the 1·06 last year. In general this denotes a trend towards a greater proportion of older persons in the Community, and confirms the migration of the younger age groups, i.e., of Service personnel.

The year records a phenomenal and unprecedented reduction of the number of infant and neonatal deaths, so of the respective rates derived therefrom, out of 485 live-births only four babies under one year old, all in fact under four weeks old, died during the year, giving total infant and neonatal mortality rates of 8·2 per 1,000 live births, as compared with a rate of 19 in 1957 so a quinquennial mean rate of 206 for the period 1953-57. Such a wide deviation from the mean and the modal figures is almost certainly a chance variation and should not raise any false hopes, but is nevertheless very acceptable. Unfortunately the total peri-natal death rate is not materially reduced, the number of still births, 15 shewing a very considerable increase (of more than 100%) on the figure for 1957, 1956 and 1954, and a 50% increase on those for 1955 and 1953. This still-birth rate of 30 per 1000 total births, or 3% is clearly unsatisfactory, and emphasises the need for further investigation and research into the causes of stillbirth of prematurity.

Once again, for the third year in succession, no maternal deaths, or deaths due to or associated with pregnancy were recorded ; and the proportion of illegitimate to total livebirths, at 2·3% may be considered a reasonably satisfactory rate.

Scrutiny of the commoner causes of death reveals the now familiar pattern : of the total of 323 deaths no fewer than 165, or more than 50% were ascribed to diseases of the heart and circulatory system, in which are included 60 due to Coronary artery disease and Angina, 24 to strokes, or Vascular diseases of the central nervous system, and 81 to other forms of Heart Disease, as for instance Heart disease of infective rheumatic origin, and that associated with high blood-pressure or hyper-tension, of which 11 cases were recorded. Following this group in order of magnitude as a cause of death comes malignant disease or Cancer, of which some 57 fatal cases were recorded in all, 12 being of the lungs or bronchi, 10 of the female generative organs, including the breast, of which there were 6 cases ; and 29 deaths resulted from all other forms of Cancer, if we include Leukaemia—a type of blood cancer—in the malignant group. In the third place comes the group of respiratory diseases, which exclusive of tuberculosis, gave rise to 26 deaths, bronchitis causing 14, and pneumonia 12.

Respiratory Tuberculosis resulted in the deaths of three persons, and other forms of tuberculosis in one death.

Following these large general groups, we find that “other defined and ill-defined diseases”—a most unsatisfactory title one may think—were responsible for 21 deaths ; and finally that violence, in one form or another, occasioned 11, of which only 1 was due to an accident concerning a motor vehicle, 1 to suicide, and 9 to other forms of accident, in industry and in the home. Such figures do give rise to the serious reflection that by far the greater number of fatal accidents in this country are those unconnected with road



traffic ; and that possibly a switch of emphasis and publicity is required towards home and industrial dangers and away from the well-known hazards of the roads, to which quite a disproportionate amount of attention has been directed in the past decade or two, resulting to some extent in a very natural misconception on the part of the public generally as to their relative impact on the well-being of the community.

The 57 deaths due to Cancer referred to in the previous paragraph represent a welcome decrease on the figure of 69 last year, and is more in keeping with the quinquennial mean figure of 56 for the years 1953-1957 inclusive. Cancer has thus accounted for approximately 18% of all deaths during the year, as compared with the slightly greater 19% in 1957. Cancer of the lungs and bronchi, however, has increased both actually and relatively, 12 deaths being recorded in contrast to a quinquennial mean of 8·6 and the increasing trend in incidence of this disease has been maintained—a most unfortunate and unpalatable fact which challenges preventive medicine, and particularly Health Education, for in the present state of our knowledge—(or should we say, of our ignorance)—of the reason for this trend, preventive measures based on general principles seem to hold out the best—and possibly the only—promise of success.

Notifications of all “notifiable diseases” show a very material reduction on the number for last year, being 155 as compared with 721, due in the main to a lowered incidence of measles, from 601 to 82, of whooping cough from 18 to 3, and of pulmonary tuberculosis from 36 to a more average and usual figure of 17. As regards other individual zymotic diseases there was some increase from 23 to 32, in the number of cases of scarlet fever, and also from 1 to 3 of erysipelas.

When considering the incidence of notifiable disease it is pertinent to draw attention to a certain laxity on the part of some doctors to fulfil the statutory requirements of the Public Health Act, 1936 and of the specific regulations made thereunder relating to diseases not mentioned therein, and in particular to a general failure to notify under the Food and Drugs Act, 1955, cases of food poisoning which they may be called upon to treat. Not infrequently, as a result of this, or of delay in sending such notifications, information of or outbreaks of this group of diseases is not received in time to enable full and proper enquiries and investigations to be carried out by the Health Department in conjunction with the Public Health Laboratory service, thus prejudicing (1) the control of the current outbreak, whether in the home, school meals centres or industrial canteen, and (2) the accuracy of the statistical records of the authority as supplied to the Registrar General and the Ministry of Health.



As mentioned previously four deaths resulted from tuberculosis—the same figure as for 1957, but this represents only one-half of the quinquennial mean number of deaths during the years 1953-57, whereas the number of notifications at 20 is two-thirds of the quinquennial figure. This means of course that the number of cases diagnosed and notified are not falling as rapidly as the number of deaths from this disease, a result almost certainly due to continued high ascertainment rate and the improved results of modern tuberculosis therapy. Hence there is continuing a small but steady increase in the number of persons on the tuberculosis register, as tabulated in the later text of this report, which shows the total, at 31st December, to be 270 cases, 216 of the respiratory and 54 of the non-respiratory type. There is thus an incidence of almost exactly 8 per 1000 population, and a notification rate of 0·59 per 1,000, as compared with a rate of 0·94 for the County as a whole (1957 figure). The number of cases actually resident in the whole County and consequently the case incidence per 1,000, is not available at the time of writing. No cases of diphtheria, poliomyelitis, meningococcal meningitis or ophthalmia neonatorum occurred during the year, and only one case each of typhoid fever, dysentery, food poisoning and puerperal pyrexia, the first named arising in a hospital community.

Matters of environmental hygiene in which further improvements are called for relate to the following ; the demolition and clearance of unfit houses in accordance with the five-year plan ; the completion of the main drainage schemes for the built-up area adjoining the County Borough to the West and East, in Penketh and Sankey, and Padgate and Woolston respectively ; the initiation of a similar scheme for the parishes of Winwick and Croft; improved sanitation and washing facilities at some of the older and smaller schools ; the adequate maintenance and control of refuse tips, including private tips ; Clean Air and Smoke prevention ; and the safeguarding of underground sources of water supply. Adequate housing, although still very important, is one feels, becoming steadily less of a problem each year as the pressure of demand diminishes.

Turning next to the so-called “ personal health services ” of individual and family character which are the responsibility of the County Council as the “ Local Health Authority ”, administered under the Health Administration scheme of the County Council by No. 10 Divisional Health Committee, this work in its various sections has been continued and generally expanded during the year, although cases dealt with by the Ambulance Service, both directly and on behalf of the County by the Warrington County Borough, fell slightly from 2,812 to 2,775, and the actual attendances at Child Welfare Centres from 8,179 to 7,877, the number of individual children, however, being virtually the same. The number of home-help cases, however, increased from 190 to 216, the increase being



in the "over 65" age group. More children under 5 and under 15 years of age, received a primary immunisation course against diphtheria, whooping cough and tetanus ; more children under 1 year old were successfully vaccinated against smallpox, and very many more vaccinations against poliomyelitis were undertaken. These actual figures are given later in the text of the Report, and call for no comment except that one can only deplore the continued lack of response by many parents to all appeals to have their children protected against smallpox and diphtheria ; and force the impression that publicity relating to poliomyelitis vaccination has switched parental concern to that disease, as a very real and present danger, and away from these two older, but equally or even more deadly illnesses which however, are for the present being held in check.

In conclusion, Mr. Chairman, I would like to place on record my thanks to you, and to all members of the Health Committee and of the Council for your help, interest and encouragement in the work of the Health Department, and to extend my gratitude and appreciation to the Clerk and to the Heads of the other departments of the Council, who at all times have so willingly co-operated with the Health Department on matters of mutual interest and concern. To the Staff of the Health Department itself, technical, administration and clerical, I also express my appreciation of conscientious, efficient and loyal service, and particularly to the Chief Public Health Inspector, Mr. W. A. Morrison, on whom rests the burden of day-to-day administration in addition to his technical responsibilities.

I am,

Mr. Chairman and Gentlemen,

Yours obediently,

A. C. CRAWFORD,

MEDICAL OFFICER OF HEALTH.



## SECTION I.

### PHYSICAL CONDITIONS AND GENERAL DESCRIPTION.

The Warrington Rural District is situate in the South-west of the County of Lancaster. It is bordered on the North by the districts of the County Borough of St. Helens and the Urban Districts of Newton-le-Willows and Golborne; to the East is the Urban District of Irlam, and on the West is the Rural District of Whiston and the Borough of Widnes. The southern boundary, which is also the County boundary, is the Manchester Ship Canal, and the northern perimeter of Warrington County Borough.

The area of the district is approximately 35 square miles, being 14 miles from east to west, with a narrow waist of about two miles in the centre between Warrington and Newton, broadening to an average width of about six miles.

Agriculture is the principal occupation in the area, but there are in the more urban parishes a variety of industries, including tanning, light engineering, brewing, brick making and paint manufacture.

The area is, as a whole, comparatively low-lying with only a gentle undulation to relieve the otherwise flat landscape. The fall of the land is to the south, with the streams and brooks discharging into the River Mersey, which winds its way across the southern portion of the district only slightly to the north of the Manchester Ship Canal.

### DISTRICT STATISTICS

Area (acres) .....	22,733
Estimated population, (mid. 1958) .....	33,790
Number of inhabited houses and flats .....	8,225
Rateable value .....	£366,843
Sum represented by a 1d. rate .....	£1,488
Births assignable to district .....	485
Deaths assignable to district .....	323
“ Natural increase ” .....	162

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SECTION II.

VITAL STATISTICS

BIRTHS :	M.	F.	Total
Live Births—Legitimate .....	252	222	474
Illegitimate .....	4	7	11
	<hr/>	<hr/>	<hr/>
	256	229	485
	<hr/>	<hr/>	<hr/>

Live Birth Rates—" Crude " 14·4; " Adjusted " 14·6 per 1,000 Population ; Comparability factor 1·02.

The " Adjusted " Live Birth Rate is the " Crude " Live Birth Rate after adjustment by a comparability factor supplied by the Registrar General.

	M.	F.	Total
STILL BIRTHS .....	6	9	15

Still Birth rate—30 per 1,000 total (Live and Still) Births.

DEATHS :	M.	F.	Total
General .....	178	145	323

Death Rates—" Crude " 9·6 ; " Adjusted " 9·2  
Comparability factor 0·96.

The " Adjusted " Death Rate is the " Crude " Death Rate after adjustment by a comparability factor supplied by the Registrar General.

INFANT DEATHS (Deaths of Infants under 1 year of age) :  
Total Infant Mortality Rate—8·2 per 1,000 live births.

	M.	F.	Total
Infant Deaths .....	—	4	4

Infant Mortality Rate of Legitimate Infants—8·2 per 1,000 live births.  
Infant Mortality Rate of Illegitimate Infants—Nil.

NEO-NATAL MORTALITY :  
Deaths of Infants under 4 weeks—4.  
Neo-natal mortality rate—8·2 per 1,000 total live births.

MATERNAL DEATHS—Nil.  
Maternal Death Rate—Nil per 1,000 total births.



VITAL STATISTICS—COMPARATIVE TABLE

YEAR	LIVE BIRTHS		DEATHS (ALL CAUSES)		STILLBIRTHS		MATERNAL MORTALITY		INFANT MORTALITY			CANCER MORTALITY			
	No. regis- tered	Rate per 1,000 popu- lation	No. regis- tered	Rate per 1,000 popu- lation	No. regis- tered	Rate per 1,000 total births	TOTAL		NEO-NATAL		No. of deaths regis- tered	Rate per 1,000 popu- lation	Per- centage of all deaths		
							No. of deaths regis- tered	Rate per 1,000 live births	No. of deaths regis- tered	Rate per 1,000 live births					
1958	485	*14.4	323	*9.6	15	30	Nil	Nil	4	8.2	4	8.2	57	1.7	17.6
1957	528	*15.6	366	*10.8	7	13	Nil	Nil	14	27	10	19	69	2.0	18.8
1956	450	*12.5	338	*9.4	7	15	Nil	Nil	14	31	9	20	52	1.44	15.4
1955	439	*12.7	329	*9.5	11	24	1	2.22	11	25	9	21	46	1.33	13.9
1954	464	*12.9	331	*9.2	6	13	Nil	Nil	14	30	11	24	55	1.5	16.6
1953	481	12.8	331	8.8	10	20	Nil	Nil	14	29	9	19	54	1.4	16.3
Average 5 years 1953—1957	..	13.3	..	9.5	..	17	..	0.4	..	28	..	..	55	1.53	16.2

\*-ADJUSTED

Live birth-rate (comparability factor, 1.02) @ 14.4 per 1,000

Death-rate (comparability factor, 0.96) @ 9.6 per 1,000

# COMPARISON OF BIRTH RATES, DEATH RATES AND ANALYSIS OF MORTALITY AND MORBIDITY.

	Warrington Rural 1957	England & Wales 1958	1958
	Rate per 1,000 population.		
BIRTHS—			
Live—Adjusted .....	17.0	14.6	16.4
Crude.....	15.6	14.4	
Still .....	0.20	0.4	0.36
DEATHS—			
All causes (Adjusted) .....	11.4	9.2	11.7
Typhoid & Paratyphoid Fevers....	0.00	0.00	0.00
Whooping Cough .....	0.00	0.00	0.00
Diphtheria .....	0.00	0.00	0.00
Tuberculosis all forms .....	0.12	0.12	0.10
Influenza .....	0.00	0.00	0.05
Smallpox .....	0.00	0.00	0.00
Ac. Poliomyelitis & Encephalitis ..	0.00	0.00	0.00
Pneumonia .....	0.38	0.30	0.50
NOTIFICATIONS—			
Typhoid Fever .....	0.14	0.00	0.00
Paratyphoid Fever .....	0.00	0.00	0.00
Meningococcal Infection .....	0.00	0.00	0.02
Scarlet Fever .....	0.70	0.94	0.86
Whooping Cough .....	0.53	0.00	0.74
Diphtheria .....	0.00	0.00	0.00
Erysipelas .....	0.00	0.08	0.07
Smallpox .....	0.00	0.00	0.00
Measles .....	17.67	0.24	5.75
Pneumonia .....	0.47	0.30	0.49
Ac. Poliomyelitis (including Polio- encephalitis) : Paralytic .....	0.00	0.00	0.03
Non-Paralytic .....	0.03	0.00	0.01
Food Poisoning .....	0.00	0.00	0.20
	Rate per 1,000 Live Births		
DEATHS—			
All causes under 1 year of age ....	27	8.2	22.5
Enteritis and Diarrhoea under 2 years of age.....	0.00	0.00	0.00
MATERNAL MORTALITY—			
Excluding Abortion .....	0.00	0.00	0.35
Due to Abortion .....	0.00	0.00	0.08
	Rate per 1,000 Total (Live & Still) Births.		
NOTIFICATIONS—			
Puerperal Pyrexia .....	0.00	0.00	0.26

## DEATHS.

The total number of Deaths registered in the district was 258 ; 21 of these were of persons whose usual place of residence was outside the district ; these have been assigned to the areas in which they formerly resided.

86 deaths of persons normally residing in this area, but dying elsewhere, have been included in the total deaths properly assignable to this district.

## CAUSES OF DEATH.

	Males	Females	Total
ALL CAUSES .....	178	145	323
Tuberculosis of respiratory system .....	2	1	3
Tuberculosis—other forms .....	1	—	1
Syphilis .....	1	—	1
Diphtheria .....	—	—	—
Whooping Cough .....	—	—	—
Meningococcal infections .....	—	—	—
Acute Poliomyelitis .....	—	—	—
Measles .....	—	—	—
Other infective and parasitic diseases ....	1	—	1
Malignant neoplasm, stomach .....	4	2	6
„    „    lung, bronchus ....	7	5	12
„    „    breast .....	—	6	6
„    „    uterus .....	—	4	4
Other malignant & lymphatic neoplasms..	20	8	28
Leukemia, aleukemia .....	1	—	1
Diabetes .....	1	2	3
Vascular lesions of nervous system .....	10	14	24
Coronary disease, angina .....	40	20	60
Hypertension with heart disease .....	4	7	11
Other heart diseases .....	38	43	81
Other circulatory disease .....	8	5	13
Influenza .....	—	1	1
Pneumonia .....	7	4	11
Bronchitis .....	11	3	14
Other diseases of respiratory system ....	—	1	1
Ulcer of stomach and duodenum .....	1	—	1
Gastritis, enteritis and diarrhoea .....	—	1	1
Nephritis and nephrosis .....	3	2	5
Hyperplasia of prostate .....	1	—	1
Pregnancy, childbirth, abortion .....	—	—	—
Congenital malformations .....	—	1	1
Other defined and ill-defined diseases ....	10	11	21
Motor vehicle accidents .....	1	—	1
All other accidents .....	5	4	9
Suicide .....	1	—	1
Homicide and operations of war .....	—	—	—



SECTION III.

NOTIFIABLE DISEASES DURING 1958

There were 135 cases notified during the year, excluding Tuberculosis. These tables show the number, by age groups, of Infectious Diseases notified, and the number removed to Hospital.

D I S E A S E	Total cases at all ages	Under 1	1—2	3—4	5—9	10—14	15—24	25 & Over	Total cases removed to Hospital	Cases occurring in Winwick Hospital
Scarlet Fever .....	32	..	3	4	23	2	..	..	15	..
Measles.....	82	4	16	20	41	1	..	..	..	..
Whooping Cough .....	3	..	2	..	..	1	..	..	..	..
Poliomyelitis.....	..	..	..	..	..	..	..	..	..	..
Typhoid Fever.....	1	Under 5	5—14	15—44	45—64	65 & Over			1	1
Pneumonia .....	10	..	..	..	2	1			..	..
Puerperal Pyrexia .....	1	..	..	1	..	..			..	..
Dysentery .....	1	..	..	..	1	..			1	..
Erysipelas .....	4	..	..	3	1	..			..	..
Food Poisoning .....	1	..	1	..	..	..			..	..



NOTIFIABLE DISEASES—COMPARATIVE TABLE

DISEASE	1958		1957		1956		1955		1954		1953		Mean of Years 53—57	
	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths
Scarlet Fever .....	32	..	23	..	31	..	34	..	63	..	51	..	40	..
Diphtheria .....	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Measles .....	82	..	601	..	53	..	155	..	198	..	239	..	249	..
Whooping Cough .....	3	..	18	..	16	..	33	..	1	..	118	..	37	..
Enteric group Fevers .....	1	..	5	..	1	..	..	..	..	..	..	..	1	..
Dysentery .....	1	..	17	..	..	..	1	..	3	..	83	..	21	..
Food Poisoning .....	1	..	..	..	..	..	65	..	..	..	18	..	17	..
Ophthalmia Neonatorum ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Puerperal Pyrexia .....	1	..	1	..	..	..	1	..	..	..	..	..	..	..
Ac. Poliomyelitis and Polioencephalitis .....	..	..	2	..	3	..	..	..	..	..	..	..	1	..
Meningococcal Infection ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Primary and Influenzal Pneumonia .....	10	12	15	12	44	13	8	11	22	15	23	13	22	13
Erysipelas .....	4	..	1	..	3	..	3	..	1	..	8	..	3	..
Tuberculosis respiratory ..	17	3	35	4	18	7	19	7	27	15	37	14	27	9
Tuberculosis non-respi- ratory .....	3	1	3	..	5	1	5	..	2	..	..	..	3	..
TOTAL .....	155	16	721	16	174	21	324	18	317	30	577	27	421	22

TUBERCULOSIS.

YEARS	NEW CASES				DEATHS			
	Respiratory		Non-Respiratory		Respiratory		Non-Respiratory	
	M.	F.	M.	F.	M.	F.	M.	F.
0 .....	..	..	..	..	..	..	..	..
1 .....	..	..	..	..	..	..	..	..
5 .....	..	..	..	..	..	..	..	..
10 .....	1	..	..	..	..	..	..	..
15 .....	1	..	..	..	..	..	..	..
20 .....	2	1	..	2	..	..	1	..
25 .....	..	..	..	..	..	..	..	..
35 .....	2	..	1	..	..	..	..	..
45 .....	4	1	..	..	1	..	..	..
55 .....	3	..	..	..	1	..	..	..
65 and upwards	2	..	..	..	..	1	..	..
Totals .....	15	2	1	2	2	1	1	..
Grand Totals	17		3		3		1	

CASES OF RESPIRATORY AND NON-RESPIRATORY  
TUBERCULOSIS ON REGISTER AT 31st DECEMBER

YEAR	Respiratory			Non-Respiratory		
	Males	Females	Total	Males	Females	Total
1954	97	56	153	22	22	44
1955	106	58	164	24	23	47
1956	113	69	182	26	24	50
1957	132	81	213	27	26	53
1958	139	77	216	27	27	54

## SECTION IV.

### FOOD HYGIENE.

#### FOOD AND DRUGS ACT, 1955.

The following details of food samples taken under the above Act, have been supplied by the County Medical Officer of Health.

A total of 167 samples was obtained, consisting of 142 samples of milk (four of which were samples of Channel Islands milk) and 25 others comprising:—

4 Cheese	5 Tea
2 Cheese spread	4 Salt
2 Cod liver oil	1 Tapioca
2 Seidlitz powder	1 Health salts
1 Cod liver oil emulsion	3 Meat—canned

The samples were submitted to the County Analyst for analysis, and I give below details of those which were found to be adulterated or which otherwise gave rise to irregularity :—

<i>Type</i>	<i>Result of Analysis</i>	<i>Action Taken</i>
Milk	Fat 2.90%. Deficient 3.3% fat.	Producer notified.
Cod Liver Oil Emulsion	Acid value of oil 6.1, Vitamin A content of oil 540 I.U.'s per gramme. B.P. limits are 1.2 and 600 I.U.'s.	Stock surrendered.
Seidlitz Powders (Extra Strong)	Contents of blue packets weighed 19.30 gms. 19.18 gms. and 19.26 gms. B.P. limits for blue packets are 16.6—18.4 gms.	Packers communicated.
Milk	Freezing point indicated 0.5% of extraneous water.	Producer cautioned. Further samples.
Milk	Fat 2.90%. Deficient 3.3% fat	All obtained from same vendor— Notified.
Milk	Fat 2.90%. Deficient 3.3% fat	
Milk	Fat 2.90%. Deficient 3.3% fat	
Milk	Freezing point indicated presence of 1.6% of extraneous water.	Producer cautioned.

#### FOOD PREPARING PREMISES.

All premises used for the preparation and storage of food-stuffs, grocers, butchers, ice-cream suppliers, bakehouses, street traders and food delivery vehicles were inspected. The supervision of canteens in factories, etc., is included in Section VII of this Report. It was not found necessary to take legal proceedings for non-compliance with regulations.



## Food Preparing Premises

Type of Business	Number	Inspections
Grocers and Mixed General . . . . .	67	164
Butchers . . . . .	6	24
Fried Fish Shops . . . . .	7	16
Cafes and Mobile Snack Bars . . . .	8	48
Ice-cream Vendors . . . . .	29	

## ICE-CREAM

Number of Retail Vendors registered . . . . .		29
Number of Bacteriological samples taken . . . . .		38
Result of samples . . . . .	Grade 1	29
	Grade 2	9
	Grade 3	—
	Grade 4	—

In general it may be taken that Grades 1 and 2 are satisfactory and we thus did not have any unsatisfactory samples out of a total of 38.

There is no ice-cream manufactured in the area, and the retailers now registered sell pre-packed ice-cream only.

## MILK SUPPLIES.

Routine milk sampling has continued throughout the year for the purpose of bacteriological analysis, which aims at ensuring a general standard of purity as regards the total number of organisms which affects the keeping quality of milk (Methylene Blue Tests), the efficiency of pasteurisation processes (the Phosphatase Test) and is concerned specifically as to the presence in the samples of the bacillus of tuberculosis, the bovine species of which is of course the cause of tuberculosis diseases in bones, joints and lymphatic glands, and may also attack other organs of the body.

The results of samples submitted to various tests are :—

Raw Milk	No. of Samples	No. Unsatis.
Tuberculosis—Biological Test . . . . .	2	—

## HEAT TREATED MILK

“ Pasteurised Milk ”

Phosphatase Test . . . . .	102	—
Methylene Blue Reduction Test . . . .	104	4

“ Sterilised Milk ”

Turbidity Test . . . . .	1	—
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In all cases of positive results of test for tuberculosis information is forwarded to the Divisional Inspector of Ministry of Agriculture who arranges for veterinary inspections to be carried out at the farms concerned.



Licences issued under the Milk (Special Designation) Regulations were as follows :—

Designation	Regulations	Type of Licence	No. Issued.
Tuberculin Tested	Milk (Special Designation) Raw Milk Regs. 1949.	Dealer's	13
Tuberculin Tested	do.	Supplementary	12
Pasteurised	Milk (Special Designation) (Pasteurised & Sterilised Milk) Regs. 1949	Dealer's	19
Pasteurised	do.	Supplementary	14
Pasteurised T.T.	do.	Dealer's	7
Pasteurised T.T.	do.	Supplementary	7
Sterilised	do.	Dealer's	38
Sterilised	do.	Supplementary	8

### INSPECTION OF MEAT AND OTHER FOODS.

The bulk of this work continues at a Bacon factory where line dressing is in progress and which places on the Inspector a responsibility which has to be resolved within probably no more than one minute. This duty is exacting and demands both mental and physical output of the highest order.

#### Carcases inspected and condemned.

	Cattle, Calves			Pigs			Sheep		
	1956	1957	1958	1956	1957	1958	1956	1957	1958
Number killed (if known) ..	Nil	Nil	3	53,925	59,475	78,121	782	624	Nil
Number inspected.....	Nil	Nil	3	53,925	59,475	78,121	782	624	Nil
<b>All diseases, except T.B. :</b>									
Whole carcases condemned..	Nil	Nil	Nil	38	107	147	Nil	1	Nil
Carcases of which some part or organ was condemned..	Nil	Nil	Nil	2,073	2,883	4,113	14	16	Nil
Percentage of the number inspected affected with disease other than T.B. ..	Nil	Nil	Nil	3.9%	5%	5.45%	0.17%	2.7%	Nil
<b>Tuberculosis only :</b>									
Whole carcases condemned..	Nil	Nil	Nil	155	130	119	Nil	Nil	Nil
Carcases of which some part or organ was condemned..	Nil	Nil	Nil	1,134	1,009	1015	Nil	Nil	Nil
Percentage of the number inspected affected with Tuberculosis .....	Nil	Nil	Nil	2.3%	1.9%	1.45%	Nil	Nil	Nil

**OTHER FOOD-STUFFS CONDEMNED.**

Of the food inspected the following was voluntarily surrendered. This class of food-stuff is examined on special request or in the course of routine visits to food premises.

22 tins fruit.  
41 tins meat.  
15 tins vegetable.  
2 tins milk.  
3 tins soup.  
1 tin fish.

**SLAUGHTER OF ANIMALS ACT, 1933 TO 1954.**

There are 25 Slaughtermen holding licences granted by this Authority.

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## SECTION V.

### HOUSING.

The number of inhabited houses and flats in the area is gradually rising and now totals 8,225. New construction is gaining pace and shows a most creditable increase since 1953, an increase which is due to private developers. The average number of houses completed by the Council each year since 1948 is 74 and this year private houses completed number 241.

Under the Housing Act 1949 and Housing Repairs and Rents Act, 1954, 15 applications were made for financial assistance for the improvements of housing accommodation, and 14 approved, and £904 was granted for this purpose. It is significant that these applications are, in the main, made by owner/occupiers. The number of cases qualifying for an increase of rent consequent on houses being put into a good state of repair was insignificant.

#### RENT ACT, 1957.

Inspections are made of all houses for which applications for grants are made and certificates as to the repairs needed and the life expectancy issued.

The extent to which repairs are completed under the Rents Act, 1957 may be gauged from the table below:—

Application for Certificate of Disrepair .....	44
No. of "G" Forms checked at houses .....	44
No. of Certificates authorised .....	43
No. of Certificates refused .....	1
Notices of Proposal to issue Certificates (J) .....	43
Undertakings accepted "K" .....	21
Undertakings refused .....	1
Certificates of Disrepair issued .....	23

A survey of the applications for Council houses reveals that the number of families who "need" houses from a Public Health aspect is a small fraction of the total.

The vast majority of houses were erected after 1919, and the number of really bad houses is comparatively low, but the rehousing problem is still difficult. The financial problems now seem to be of major importance, the higher loan rates coupled with the increasing costs of maintenance are putting a severe brake on new developments by the Council.

New Council housing developments are extremely hampered by the lack of sewerage facilities and until such facilities exist considerable embarrassment must occur in certain parishes.



## NEW HOUSES ERECTED.

	Prefabricated				Traditional Permanent		
	Temporary 1956	Permanent 1957	Permanent 1958		1956	1957	1958
Local Authority .....	Nil	Nil	Nil	57	Houses 49	Houses 30	
Other bodies and persons	Nil	Nil	Nil	225	Flats 24	Flats 9	241

## CARAVANS.

Under the Public Health Act, 1936, Local Authorities may grant Licences to persons to allow land occupied by them to be used as a site for caravans or to a person to permit him to occupy a caravan. There are special exceptions, but in general this may be taken to be the rule.

Standard conditions for site licences are in force and two sites are licensed. Personal licences were issued in 94 cases for 6 monthly periods and the extent of this particular duty may be gauged by the fact that no less than 475 visits were made by Inspectors.

The following conditions are enforced in the case of personal licences:—

1. Provide suitable and sufficient sanitary accommodation.
2. Provide a suitable dustbin for the storage of refuse.
3. Provide an adequate water supply.
4. The waste water to be discharged over a trapped gulley connected to a suitable soakaway. The gulley to be surrounded with an area of cement concrete.
5. The Caravan to be sited on a hard standing.
6. The Site to be kept in a clean and tidy condition.

The use of a moveable dwelling in this area is purely for housing purposes ; either because permanent housing accommodation is required, or the occupier prefers to live in a caravan, or housing accommodation is required for a temporary period only. Fortunately, the bad type of occupant and the number of structurally unsatisfactory vans have been kept to a minimum by vigorous action.

## INSPECTION OF EXISTING PROPERTIES.

## INSPECTION OF DWELLING-HOUSES DURING THE YEAR.

1. (a) Total number of dwelling-houses inspected for housing defects (under Public Health and Housing Acts) ..... 361  
(b) Number of inspections made for the purpose .... 1,117
2. Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation ..... 17
3. Number of dwelling-houses (exclusive of those referred to under the preceding sub-head) found not in all respects reasonably fit for human habitation..... 219

# REMEDY OF DEFECTS DURING THE YEAR WITHOUT SERVICE OF FORMAL NOTICES.

Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their officers .....	144
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## ACTION UNDER STATUTORY POWERS DURING THE YEAR.

### (a) *Proceedings under Sections 9, 10, and 16 of the Housing Act, 1936:*

(1) Number of dwelling-houses in respect of which notices were served requiring repairs .....	Nil
(2) Number of dwelling-houses which were rendered fit after service of formal notice:—	
(a) By Owners .....	Nil
(b) By Local Authority in default of owners ..	Nil

### (b) *Proceedings under Public Health Acts*

(1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied .....	202
(2) Number of dwelling-houses in which defects were remedied after service of formal notices:—	
(a) By Owners .....	31
(b) By Local Authority in default of owners ..	4

### (c) *Proceedings under Housing Act, 1957 (Section 17):*

(1) Number of dwelling-houses in respect of which Demolition Orders were made .....	29
(2) Number of dwelling-houses demolished in pursuance of Demolition Orders .....	34
(3) Number of dwelling-houses closed .....	6

## LEGAL ACTION.

<i>Case</i>	<i>Nuisance</i>	<i>Court decision.</i>
No. 1	Various. (6 houses)	19th February, Case adjourned. 19th March, Case adjourned. 21st May, Nuisance Order granted.
No. 2	Various.	3rd September, Nuisance Order granted. 3rd December, Fined £5 for non-compliance.



SECTION VI.

SANITARY CIRCUMSTANCES OF THE AREA.  
WATER SUPPLY.

A piped supply of water extends throughout the area, with the exception of some isolated farms and cottages. The principal supplier is Warrington Corporation, but a small area of Cuerdley parish is supplied by Liverpool Corporation.

Some disquiet has been caused by the recent pollution of one of the principal deep well sources of supply and its use had to be discontinued for some time. The provision of suitable chlorination and dechlorination equipment has enabled this source to come into use but it cannot be considered satisfactory until the source of pollution is eradicated.

The number of houses without a proper supply of water within the house is gradually being reduced and the table below indicates how small these cases now are.

The following samples have been taken :—

8 Samples	Type			
	Bacteriological		Chemical	
	Satisfactory	Unsatis.	Satisfactory	Unsatis.
	2	2	2	2
From Public Mains		From Private supplies, e.g. wells, springs, etc.		
PARISH	Direct to houses			
	No. of dwelling houses	No. of dwelling houses	No. of population	
Burtonwood .....	769	2	5	
Croft .....	517	1	3	
Cuerdley .....	48	..	..	
Penketh .....	1,346	..	..	
Poulton .....	1,802	1	5	
Rixton .....	579	1	3	
Sankey .....	1,707	..	..	
Winwick plus				
Mental Hospital .....	475	..	..	
Woolston .....	977	..	..	
Total Whole District ..	8,220	5	16	

RIVERS AND STREAMS.

The area is traversed from north to south by two main streams—the Sankey Brook and the River Glaze. Across the southern boundary runs the River Mersey, the eventual outlet for these streams. There are several smaller brooks winding through the area, but none of any particular note.



The fact that these brooks exist seems to have provided a wonderful opportunity for building development—a ready-made drainage system to hand. The rapid development of the area since the middle twenties has now changed these brooks into open sewers.

The development of proper sewerage systems are required to remove the extensive pollution and, until this occurs, then our rivers and streams will remain as such in name only. It is most essential that when pollution is reduced by the construction of proper sewerage schemes, new pollution is not allowed by development outside the scheme.

### DRAINAGE AND SEWERAGE.

The drainage from over 70 per cent. of the properties in this area consists of treatments in a septic tank with a subsequent discharge of the effluent into the nearest ditch or stream. Effluents of both old and new tanks is unsatisfactory and cannot be satisfactory until suitable filtration takes place.

The cleansing of these septic tanks and ditches is carried out by the Surveyor's Department by means of a mechanical cesspool emptier. In general, efforts are made to cleanse each tank once each twelve months and this is done as a charge on the rates.

A small settling tank and circular filter deals with an estate in Glazebrook, but the effluent is unsatisfactory. A small treatment works dealing with effluent from a Council housing estate has been gradually improved although its position leaves much to be desired; regular maintenance has kept it free from nuisance. The remaining sewage drains via septic tanks of varying size and construction to the open sewers, i.e. the streams.

Three samples of effluent were taken during the year and the results were as follows :—Satisfactory, 1 ; Unsatisfactory, 2.

Several schemes are in hand for the sewerage of the more urbanised parishes.

A scheme for the parishes of Poulton-with-Fearnhead and Woolston is in progress, but it will be some years before completion.

A revised scheme for Penketh and Great Sankey has been approved and is in progress.

With the exception of the treatment works the Sankey Valley scheme is now almost completed. A main drainage scheme has been completed in Winwick. At Croft a disposal works has been developed for the existing and proposed Council estate together with the central area of the village proper.

Conversions have commenced in Burtonwood and Collins Green since the extension and improvements of sewers with outfalls into the Sankey Valley Scheme.

A sewage treatment works scheme is now nearing completion for the Hollins Green area of Rixton.

In the parishes of Croft and Rixton-with-Glazebrook disposal works, developed initially for Council house schemes and big enough for the villages as a whole, exist but no sewerage schemes are in progress. It is essential that schemes be proposed for these villages.

The next few years will show a big change in sewerage facilities and the completion of the schemes now in hand and envisaged will see the fruition of many years hard work.

### PUBLIC CLEANSING.

The collection and disposal of refuse, together with its ancillary functions by the Local Authority, is under the control of the Chief Public Health Inspector. The collection service, which is weekly, is carried out by special-type refuse vehicles, with loaders' cabs. Due to the fairly long distances that machines have to travel from the depot, the inclusion of the loaders in the driver's cab is obviously a desirable feature. Certainly the weather protection and additional safety provided appear to be thoroughly appreciated by the workmen.

The collection of pail contents is carried out weekly by a similar machine. A detachable tank is mounted on rollers inside the body, a method which simplifies both loading and unloading. Supplies of both liquid and powder disinfectants are carried in order that pail compartments and pails may be treated as required. This procedure is far from satisfactory, but is probably as effective as any other under the circumstances. The only solution to this problem is the conversion of the pail closets as rapidly as possible to a water-carriage system.

All workmen are provided with protective clothing, and although this provision is by no means cheap, yet it is a feature that is now a necessity if workmen are to be encouraged to engage in this class of work.

The provision of dustbins and sanitary pails is carried out by the Local Authority as a rate charge and enables unsatisfactory bins and pails to be replaced with the minimum of delay. The storage of refuse at the home, pending collection, must obviously be in a hygienic manner, and this can only be effected by the provision of a proper receptacle. B.S.S. bins are purchased in bulk and delivered weekly. Weekly reports are received from each driver, of the bins and pails requiring replacement, the addresses are checked in a card index file, the bin or pail is inspected, and delivery receipts are signed by the householder. Where a bin is being mis-used, a visit is paid by an inspector, when the householder is warned that they will be held liable for replacement. Three sizes of bins are issued— $3\frac{1}{4}$ ,  $2\frac{1}{2}$  and 2 cubic feet, the size of bin being decided by the type of house and size of family.



A scheme for the quarterly inspection of vehicles by a sub-committee at which points are awarded for maintenance and cleanliness has provided a competitive spirit in this work, and the monetary prizes awarded appear to take second place to the pride which the winning driver takes in his achievement. This scheme has raised vehicle care and maintenance to a higher level and ensures that each driver becomes fully cognizant of what is required of him.

The disposal of dry refuse takes place at several tips throughout the area, and, although sometimes they are not as "controlled" as one would wish, they are a decided improvement over past methods of disposal. A Howard Bulloader is used to excavate soil and cover the tipping sites. Wire netting screens are provided to prevent nuisance by blowing paper, and all reasonable steps are taken to ensure that the sites are satisfactory. The refuse from the Burtonwood Base is tipped at Winwick and because of its nature causes much more trouble than ordinary household refuse.

The gradually increasing number of houses of the semi-detached and detached type, and the conversion of hostel sites into flats has, because of long carries, considerably increased the collection time since the end of the war. A special twice-weekly collection of refuse is made from certain hostel sites. For these additional services a special charge is made.

#### STATISTICS:

##### Machines employed—

Karrier Dual Tip, Diesel .....	2
Karrier Bantam with "Derby" body .....	2
Karrier CK.3, with "Derby" body .....	3
Karrier CK.3, Refuse Collector, with standard steel body .....	1
Karrier Gamecock .....	1
Commer van .....	1
Trailers .....	3
Platypus Tractor .....	1

##### Workmen—

Number of Drivers .....	8
„ „ Labourers, all classes .....	24
Foreman .....	1

##### Dustbins and Pails—

Number of Dustbins provided .....	684
„ „ Pails provided .....	95

Income from Trade Refuse collections .....	£525.16.6
Income from Refuse Disposal .....	£578.13.4



## SALVAGE.

The direct collection of salvage has been confined solely to waste paper and cardboard. Due to the scattered nature of the area and the number of tipping sites, it is not considered that other materials could be separated and sold at a profit.

The collection of waste paper is made by means of large, covered trailers behind a refuse collection vehicle. The provision of a smart trailer serves a two-fold purpose—a good advertisement, and, secondly, an eminently suitable collection method.

Shops and large business premises are visited once each week by a special vehicle. The sorting of paper at tips is not as thorough or as satisfactory as one would wish, due to the soiling of paper after mixing with household refuse.

## STATISTICS :

The amount of waste paper sold during the last three years was as follows :—

	tons	cwts.	qrs.	£	s.	d.
1956 . . . . .	360	0	3 . . . .	2,967	3	6
1957 . . . . .	304	8	3 . . . .	2,490	12	3
1958 . . . . .	327	0	2 . . . .	2,675	12	0

A bonus is paid to workmen on the weight of paper collected each month above a fixed datum figure. Salvage prices have continued to fluctuate, but the reduction in the amount of paper collected is due to the limitation of sales by the purchasing company.

## RODENT CONTROL.

The recommendations of the Ministry of Agriculture and Fisheries are pursued in this sphere of work. One operative is engaged whole-time and one part-time, and the methods used are those recommended by the Ministry. Both operators and the general foreman have undertaken special instruction courses organised by the Ministry.

All Local Authority's properties, refuse tips, sewerage works, etc., were regularly inspected and treated. The sewers and sewer ditches were test-baited and treated where necessary.

On private properties treatment is carried out by agreement. Private houses are charged where the costs are recoverable, but all business premises are charged the full cost of treatment. The two offensive trade factories are both classed as areas of reservoir infestation, and both have private contracts in force with service operators.

Farmers and threshing contractors are reminded annually of their duties when threshing ricks by means of circulars, but unfortunately it is necessary to threaten legal action for full compliance.

Rodent control is a statutory duty of a Local Authority, and effective measure must be undertaken to ensure that the rat population is kept to a minimum. Contract schemes are undertaken for farmers and special premises, this service is expected to expand with the cessation of rodent contracts by the County Agricultural Committee.

#### STATISTICS :

The number of infestation treatments were as follows :—

	Major.	Minor.
Business premises . . . . .	1	7
Private dwellings . . . . .	—	164
Local Authority . . . . .	—	10

In addition, 91 manholes were test-baited.

#### ATMOSPHERIC POLLUTION.

Regular observations have been made of all factory chimneys for smoke emission. Particular problems were raised by mobile cranes and builders premises using wood as a fuel. The worst offender was from a wire rope factory, improvements to which necessitate major plant reconstruction. This will be carried out during a period of shut down in 1959, when new gas furnaces will be brought into use. It is unfortunate that problems in this sphere are so often personnel ones and the training and holding of suitable stokers is extremely difficult.

Byelaws relating to the installation of suitable firegrates in new houses came into force on 1st July, 1958.

Probably the most potent factor affecting the use of smokeless fuels is that of price. Large numbers of so-called overnight burners have been installed, mostly incorrectly, and are used to burn coal slack in a manner calculated to provide the most pollution.



### VERMINOUS AND FILTHY PREMISES.

The days when the serious infestation by bugs, of numbers of houses, seem to have gone, certainly so in this district. The residual toxicity of D.D.T. seems to have provided a long-awaited answer to the problem. Very few houses required treatment and, of these, the infestations were not heavy.

### OFFENSIVE TRADES.

There are two offensive trades in the area, only one of which is in full production. The trades carried out are fat extraction, bone boiling, and glue making. One factory is also combined with a Knackers' yard and produces pet foods.

Control is exercised by means of issuing quarterly licences only to each factory. This procedure is considered more effective than the issue of statutory notices. Phased improvements are being carried out gradually at one factory.

To prevent flies, each factory carries out spray patrol, whereby the whole of the premises are treated with D.D.T. insecticides. This system has proved of marked benefit.

Premises in Risley, used for breeding maggots for use as fish bait, not legally an Offensive Trade, have been regularly visited to ensure that a reasonable standard of cleanliness and control is maintained.

This class of work takes up a surprising amount of inspectorial time, particularly in the warmer months of the year, and yet it is only by maintaining regular and continued visits that satisfactory results are obtained.

### SANITARY ACCOMMODATION OF HOUSES AND SCHOOLS.

The fact that the majority of houses in the area are of comparatively modern construction, and that ditches and streams were available for the discharge of effluents has, in spite of the lack of sewerage systems, been responsible for the majority having water closets with treatment by means of a septic tank. Over 70 per cent. of the houses in the district are so fitted. The remaining number are provided with pail closets.

Conversions are now being carried out in the Parishes and Townships of Burtonwood, Collins Green and Winwick.

The position at the 31st December was as follows :—

W.C. Conversions completed at Burtonwood and Collins Green .....	54
W.C. Conversions completed at Winwick .....	7
W.C. Conversions completed at Poulton-with-Fearnhead .....	8
W.C. Conversions completed at Rixton .....	2



Appropriate notices are being served on Owners of properties where conversions can be made and 50 % of the approved cost paid in each case. Where owners carry out such work voluntarily, a similar grant is made. Extensions and improvements have now been carried out to nearly all licensed premises, but difficulties exist where sewers are not available—particularly Croft parish. Grants paid towards cost of conversions £1,425 1s. 0d.

The sewerage scheme in Poulton and Woolston, Great Sankey and Penketh area, is not yet at such an advanced state of development when the question of conversions can be considered.

The number of pails in use :—

	Houses	Caravans
Burtonwood.....	109	5
Croft .....	147	4
Poulton .....	112	8
Penketh.....	222	7
Rixton .....	87	1
Sankey .....	128	9
Winwick .....	32	3
Woolston .....	73	23
	<hr/>	<hr/>
	910	60
	<hr/>	<hr/>

## SECTION VII.

### INDUSTRIAL AND COMMERCIAL CIRCUMSTANCES.

#### FACTORIES ACT, 1937.

There are now 40 factories registered in the area, the principal ones being engaged in tanning, light engineering, wire-rope making and brewing. Routine inspections have been made and the attention of H.M. Inspector of Factories has been drawn to matters within his jurisdiction.

Particular attention has been paid to the standards of hygiene practised in the canteens. Some of these are maintained and run to the highest standards, but in others, constant supervision is necessary. A special approach is made to each manageress and staff to ensure that scrupulous attention is paid to personal hygiene. Circulars and posters have been provided for use within the canteens and kitchens.

Number of Canteens : 15.

Good co-operation has existed with all factory managements and in no case has there been any necessity for statutory action on any of the matters for which the Local Authority is responsible.

### SHOPS AND OFFICES.

Certain duties in the inspection of shops devolve on this Authority and certain others on the County Council. The inspectoral duties of the County Council have now been delegated to this Authority. The procedure is for half-yearly reports to be sent to the County on the matters for which it holds responsibility for action to be taken where necessary. It is unfortunate that this procedure tends to discourage the Inspector concerned from taking more than a cursory interest in this sphere of work.

It has not been found necessary to take statutory action to secure any of the requirements under the purview of this Council, all recommendations having been dealt with informally.

## SHOPS.

<i>Type of Business.</i>	<i>Numbers</i>
Grocers and Mixed General .....	70
Greengrocery and Fruiterers .....	9
Butchers .....	8
Fried Fish Shops .....	6
Cafes and Mobile Snack Bars .....	8
Newsagents .....	8
Hardware .....	6
Drapers .....	4
Hairdressers .....	3
Chemists .....	2
Post Offices .....	6
Boot Repairers .....	1
	<hr/>
	131
	<hr/>

## PETROLEUM AND CARBIDE STORAGE.

The number of Licences issued for the storage of Petroleum and Carbide of Calcium are as follows :—

Number of Licences to store Petroleum .....	62
„ „ gallons of storage capacity .....	85,310
„ „ Licences to store Carbide .....	3
Total amount of Carbide permitted .....lbs.	1,792
Number of Licences to store other spirits .....	7
Total amount of Fees paid :—	£ s. d.
Petroleum .....	46 5 0
Carbide of Calcium .....	1 10 0
Cellulose .....	1 15 0
	<hr/>
	£49 10 0
	<hr/>

The renewal of licences for the storage of petroleum and carbide is at the end of each year. Inspections have been made with particular attention to new premises and the testing of underground storage tanks at the older petrol stations.

## MEANS OF ESCAPE IN CASE OF FIRE.

Inspections have been carried out under the Public Health Act 1936 and the Factories Act 1937 to ensure that adequate means of escape in case of fire are provided to the type of premises controlled. Owing to the frequent changes which take place in factory organisations, these inspections and the preparation of certificates involve your Inspectors in a considerable amount of work.

Nine visits were made and the number of Certificates issued was five.



## SECTION VIII.

## SUMMARY OF PUBLIC HEALTH INSPECTORS' VISITS

1958

Water supply .....	34
Drainage .....	490
Stables and Piggeries .....	16
Offensive Trades .....	53
Fried Fish Shops .....	6
Tents, Vans and Sheds .....	475
Factories .....	115
Workplaces .....	4
Licensed Premises .....	8
Refuse Collection .....	641
„ Disposal .....	326
Defective Bins .....	684
„ Pails .....	77
Rats and Mice .....	97
Atmospheric pollution .....	57
Schools .....	18
Shops Act .....	218
Salvage .....	187
Petroleum .....	101
Rent Act 1957 .....	31
Means of Escape in Case of Fire .....	9
Improvement Grants .....	57
Conversions .....	1,270
Miscellaneous .....	60

## UNDER PUBLIC HEALTH ACTS.

Number of houses inspected .....	361
Visits paid to above houses .....	1,117

## UNDER HOUSING ACTS.

Number of houses inspected .....	113
Visits paid to above houses .....	268

## OVERCROWDING.

Number of houses inspected .....	5
Visits paid to above houses .....	8

## VERMINOUS PREMISES.

Number of houses inspected .....	19
Visits paid to above houses .....	28
Miscellaneous Housing Visits .....	139

## INFECTIOUS DISEASE.

Inquiries in cases of Infectious Disease .....	45
Visits <i>re</i> disinfection .....	29
Miscellaneous Infectious Disease visits .....	6

## INSPECTION OF MEAT AND OTHER FOODS.

Visits to Slaughter-houses .....	628
„ „ Butchers .....	10
„ „ Grocers .....	48
„ „ Greengrocers and Fruiterers .....	5
„ „ Dairies and Milkshops .....	18
„ „ Ice-cream premises .....	13
„ „ Food preparing premises .....	59
„ „ Restaurants .....	24
„ „ Canteens .....	82
„ „ Schools .....	16

## Milk samples :—

Bacteriological .....	95
T.B. ....	1
Ice-cream samples .....	44
Miscellaneous food visits .....	4

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## SECTION IX.

### PROVISION OF GENERAL HEALTH AND ANCILLARY SERVICES IN THE DISTRICT.

#### (1) LABORATORY ARRANGEMENTS.

##### *Public Health Laboratory Service and County Analyst's Department.*

Pathological specimens, samples of milk, food, "swabs", etc., for bacteriological investigation are dealt with by the Public Health Laboratory Service, either at the Public Health Laboratory, Mount Pleasant, Liverpool, or the Laboratory at Monsall Hospital, Monsall, Manchester. The chemical analysis of water supplies and of samples of food and drugs is undertaken at the County Analyst's Department, County Offices, Preston.

#### (2) HOSPITAL ARRANGEMENTS.

##### *(Liverpool Regional Hospital Board: Warrington and District Hospital Management Committee).*

The district contains no general hospitals within its boundaries, but it is, of course, well served by those within the County Borough of Warrington, the Warrington Infirmary and the General Hospital Warrington, for both general and specialised types of cases, e.g., orthopaedic and maternity cases; the latter type of case from the Rural District is admitted also to the Warrington Maternity Home, Victoria Park, Latchford. Cases of infectious disease (other than Smallpox) requiring hospital treatment are accommodated at the Isolation Hospital, Warrington; cases of Smallpox, should these occur, are admitted to the special Smallpox Hospital at Rock Ferry, Cheshire, belonging to the Port of Liverpool Sanitary Authority, or to Fazackerley Hospital, Liverpool.

In addition to the above, accommodation in hospitals administered by the St. Helens and District Hospital Management Committee is not uncommonly utilised by residents in the Rural area, particularly in the County Hospital, Whiston, for maternity cases. Finally, cases requiring highly specialised treatment for pediatric, orthopaedic, ophthalmic, gynaecological and ear, nose and throat defects may be admitted, by arrangement, to any of the "teaching hospitals" attached to the Universities of Liverpool or Manchester.

#### (3) AMBULANCE ARRANGEMENTS.

Full responsibility for the Ambulance Services to be provided under Section 27 of the National Health Service Act rests with the Lancashire County Council, as the Local Health Authority. This



Rural District, enclosing as it does the northerly boundaries of the Warrington County Borough, for its greater part is serviced by ambulances of the County Borough operating on behalf of the County Council, the parishes so served being those of Penketh, Great Sankey, Burtonwood (part), Winwick (part), Croft, Poulton-with-Fearnhead, Woolston, and Rixton-with-Glazebrook. The remainder of the district is served directly by the County Ambulance Service from the ambulance stations at Newton-le-Willows (Newton-le-Willows 2013), which deals with the northerly parts of the parishes of Burtonwood and Winwick, and at Mill Brow, Widnes (Widnes 2121), which deals with the Parish of Cuerdley.

Cases conveyed by ambulances from the Newton-le-Willows and adjoining county stations during the year totalled 1,002, of which 118 were urgent, and 884 non-urgent cases. In addition, the County Borough Ambulance Service, on behalf of the County Council, transported 204 emergency, 1,555 general and 14 infectious cases, making a total of 1,773, and a combined total of 2,775.

#### (4) TREATMENT CENTRES AND CLINICS.

##### *School Health Service : School Clinics.*

Schoolchildren in attendance at schools within the Rural area who require advice and treatment at a school clinic are referred to the Clinics at Widnes, Prescott, Earlestown and Cadishead, where general medical advice and treatment facilities for minor ailments, dental, ophthalmic and orthopaedic and speech defects are available. Cases requiring Child Guidance are usually referred to the Child Guidance Clinic at Huyton.

It is, however, a matter for great regret that no school clinic premises are available in the area at which special inspections could be carried out and specialist advice and treatment (ophthalmic, orthopaedic and, of course, dental) obtained. However, to give really effective cover to the district from the school health aspect would mean two clinics, one in the Penketh and Sankey and one in the Padgate and Woolston areas. The School Clinic at Woolston now approved in principle, is likely to become a concrete reality, at long last, in 1959.

##### *Child Welfare Centres.*

Sessions are held at the Infant Welfare Centres detailed below. At these centres medical and nursing advice is available for all infants and for children of pre-school age, also for expectant mothers, and those recently confined, in relation to matters affecting their general health. Supplies of a variety of infant foods, vitamin preparations, etc., are also available at cost price, together with

National Dried Milk, Orange Juice and Cod Liver Oil, the "Welfare Foods", formerly distributed under the auspices of the Ministry of Food. In addition, in special cases, schoolchildren may be examined and parents advised, although, of course, this is not a recognised feature of Infant Welfare Centre work.

(a) BURTONWOOD :

Methodist Sunday School, Phipps Lane.  
Medical Officer—Dr. H. G. M. Bennett.  
Health Visitor in charge—Miss I. Heap.  
Sessions—Weekly, each Thursday, 10.0 a.m. - 12 noon.

(b) CROFT :

Memorial Institute, Mustard Lane.  
Medical Officer—Dr. H. G. M. Bennett.  
Health Visitor in charge—Mrs. E. I. Griffiths.  
Sessions—Fortnightly, alternate Mondays, 2.0 - 4.0 p.m.

(c) PADGATE :

Methodist Sunday School, Padgate Lane.  
Medical Officer—Dr. H. G. M. Bennett.  
Health Visitor in charge—Miss S. M. Hart.  
Sessions—Weekly, each Wednesday, 2.0 - 4.0 p.m.

(d) PENKETH :

Methodist Sunday School, Chapel Lane.  
Medical Officer—Dr. H. G. M. Bennett.  
Health Visitor in charge—Miss W. Henry.  
Sessions—Weekly, each Monday, 2.0 - 4.0 p.m.

(e) SANKEY :

Eagle Sports Club, Hood Lane.  
Medical Officer—Dr. H. G. M. Bennett.  
Health Visitor in charge—Mrs. E. Burrows.  
Sessions—Weekly, Friday, 2.0 - 4.0 p.m.

(f) WINWICK :

Methodist Church Hall, Golborne Road.  
Medical Officer—Dr. H. G. M. Bennett.  
Health Visitor in charge—Mrs. E. I. Griffiths.  
Sessions—Fortnightly, alternate Thursdays, 2.0 - 4.0 p.m.

(g) WOOLSTON :

Old Church of England School, Warren Lane.  
Medical Officer—Dr. H. G. M. Bennett.  
Health Visitor in charge—Miss S. M. Hart.  
Sessions—Fortnightly, alternate Thursdays, 2.0-4.0 p.m.



During the year under review the following attendances were made at the above Welfare Centres :—

Number of individual children attending :

Born in 1958 .....	306
„ „ 1957 .....	320
„ „ 1953—56 (mean) .....	234
	<hr/>
Total .....	860
	<hr/>

Number of attendances made by children :

Under 1 year of age .....	4,778
1 - 2 years of age .....	1,423
2 - 4 „ „ .....	1,676
	<hr/>
Total .....	7,877
	<hr/>

In addition, expectant mothers made 161 attendances at these Centres.

(5) MIDWIFERY ARRANGEMENTS.

Domiciliary. Two whole-time domiciliary midwives and four district nurse/midwives are engaged on this work within the Rural District in the employment of the County Council, which is both the Local Health Authority and the Supervising Authority under the Midwives Acts. These ladies normally accept responsibility for cases residing within reasonable proximity of their homes, but the principle of the expectant mother's free choice of midwife (as of doctor), is well established. Each has a car at her disposal to enable her to respond quickly to urgent calls and to carry apparatus for analgesia.

The names and addresses of these ladies are :—

WHOLE-TIME MIDWIVES :

Miss E. Dingsdale, 8 Crossfield Avenue, Culcheth. Tel. No. Culcheth 3069.

Mrs. M. A. Lawton, 21 Marina Avenue, Sankey. Tel. No. Warr. 33236.

WHOLE-TIME NURSE/MIDWIVES :

Mrs. V. M. Gibbins, 300 Padgate Lane, Padgate. Tel. No. Warr. 34755.

Mrs. K. M. McCarron, 20 Brookside Avenue, Sankey. Tel. No. Penketh 2147.

Mrs. T. F. McConnell, 56 Haley Road South, Burtonwood. Tel. No. Newton 3217.

Mrs. M. A. Taylor, 16 Hawthorne Grove, Paddington. Tel. No. Warr. 33664.



A total of 172 babies were born in their own homes during the year ; with possibly one or two exceptions, their mothers were either actually delivered, or attended, by the midwives and nurse/midwives detailed above. Only one case of Puerperal Pyrexia was recorded during the year—a high tribute to the standard of midwifery displayed.

#### (6) HEALTH VISITING ARRANGEMENTS.

This work has been carried out by four whole-time and two part-time, fully-trained Health Visitors, who combine with health visiting duties those of School Nurse. These domiciliary visits, so necessary from the standpoint both of the supervision and of the health education of the families, are, of course, complementary to the work carried out at the Child Welfare Centre, as described above.

The names and addresses of the Health Visitors are :—

for Sankey, Penketh and Cuerdley :

Miss W. Henry, 38 Greens Road, Whiston, Prescot.

Mrs. E. Burrows, 33 Regal Drive, Windle, St. Helens,  
(Part-time)

for Padgate and Woolston :

Miss S. M. Hart, 13 Dovedale Road, Liverpool, 18.

Mrs. D. H. Creighton, 13 Higher Knutsford Road,  
Grappenhall, (Part-time).

for Burtonwood :

Miss I. Heap, “ Maynard ” Belvedere Road, Newton-le-Willows.

for Winwick and Croft :

Miss E. I. Griffiths, 49 Golborne Road, Lowton, via Warrington.

#### (7) HOME NURSING ARRANGEMENTS.

Home nursing is undertaken by four whole-time nurse/midwives and one whole-time nurse.

The demand for their services has continued to grow during the year, and although part-time relief nurses have also assisted from time to time, an extension of the staff is contemplated within the near future. An increasing proportion of the Nurses' work is made up of cases requiring “ Injections ” of various drugs and medicaments.

The names and addresses of the Nurses are :—

Mrs. V. M. Gibbins, 300 Padgate Lane, Padgate.  
Phone No. : Warrington 34755.

Mrs. J. Green, 5 Delamere Avenue, Lowton.  
Phone No. : Leigh 2150.

Mrs. K. M. McCarron, 20 Brookside Avenue, Sankey.  
Phone No. : Penketh 2147.

Mrs. F. T. McConnell, 56 Haley Road South, Burtonwood.  
Phone No. : Newton-le-Willows 3217.

Mrs. M. A. Taylor, 16 Hawthorne Grove, Paddington.  
Phone No. : Warrington 33664.

#### (8) HOME HELP ARRANGEMENTS.

This is "permissory" service provided by the County Council through No. 10 Divisional Health Committee, and is one which is not necessarily provided free of cost to the public. Its aim is to provide domestic help, when required, by reason of the presence in a household of sickness, pregnancy, mental deficiency, or to assist in the care of a child or children under school-leaving age. The service has expanded considerably and steadily as members of the public have become more fully aware of the facilities provided, and the low cost to the beneficiary, if indeed any. A very high proportion of the Service given is for the benefit of aged persons.

The Home Helps engaged are all part-time "Helps"; no whole-time workers are employed.

The Home Help Organiser, and the Assistant Home Help Organiser are :—

Organiser : Miss P. M. Butler.  
Assistant : Miss M. MacLean.

Both these ladies may be communicated with at the Divisional Health Offices, Winwick (Tel. Warrington 33144). Normally responsible for the Home Help service in the Rural District is Miss M. MacLean.

During the current year a total of 45 Home Helps, all part-time workers, assisted 216 cases within the Rural District, each "Help" working on average a 25-hour week. Assuming that the help provided followed the same pattern and proportion shewn throughout No. 10 Health Division, this means that each case received approximately three hours' help for just over three days per week during the year.

The help was given to people in a number of categories : the confinement cases, the sufferer from tuberculosis, the aged and infirm, those suffering from long-continued and chronic illnesses, or "other unspecified illness". In the Rural District, of the 216 cases helped, 70 were under the age of 65, and 146 were aged 65 or over.

#### (9) MENTAL HEALTH ARRANGEMENTS.

The district is covered for this purpose by two full-time Authorised Officers of No. 10 Health Division and by a lady mental health worker, who deal with the various aspects of mental health, including all cases in which investigation, supervision and appropriate action is required under the Lunacy Acts, Mental Deficiency



Acts and Mental Treatment Act. The names and addresses of these officers are :—

Mr. F. Griffin, Haydock Park Cottage, Newton-le-Willows.  
Phone No. : Ashton-in-Makerfield 7419.

Mr. D. Ryan, 2 Hazelbeech Close, Liverpool, 11.  
Phone No. : Liverpool Stanley 4521.

Miss M. V. Phillips, Divisional Health Offices, The Old Rectory, Winwick.

It will be appreciated that, owing to the character of the Duly Authorised Officers' duties, twenty-four hour cover is given to this type of work.

(10) ARRANGEMENTS FOR THE PREVENTION OF ILLNESS, CARE AND AFTER-CARE (INCLUDING TUBERCULOSIS) AND THE PROVISION OF CONVALESCENT ACCOMMODATION.

(1) Responsibility for the above rests with the Local Health Authority partly on an obligatory and partly on a permissive basis ; "illness" includes mental defectiveness. The scope of such arrangements is very wide, and includes all the methods of health education and propaganda relating to health matters, health visiting in the homes, (including those of persons suffering from Tuberculosis), the provision of nursing and ancillary equipment, the after-care of patients who have suffered from illness either at home or in hospital, and the provision of convalescent accommodation and rehabilitation where this is required, to enable those recently sick to regain full health and strength.

(2) Responsibility for the supervision of cases of tuberculosis in the homes and for that of family contacts, to ensure appropriate examination and advice by the Chest Physician, now devolves on a single health visitor, covering the whole of the Rural District, and working in the closest contact with the Chest Physicians at clinics in Warrington, Widnes and Newton-le-Willows. The name and official address of the Health Visitor and details of the Chest Clinic sessions concerned with Rural District cases are given below :

Miss M. Monks, c/o Divisional Health Office, The Old Rectory, Winwick.

CHEST CLINICS :

Warrington General Hospital :—

*Sessions* : Tuesday evening, 5.0—6.30 p.m. ; Wednesday, 2.0—4.0 p.m. ; Alternate Fridays, 9.30—10.30 a.m.

Widnes, Chapel Street :—

*Sessions* : Monday, Tuesday and Friday ; 2.0—4.0 p.m.



Newton-le-Willows Chest Clinic, Cottage Hospital, Bradlegh Road :—

*Sessions* : Monday, 9.0 a.m.—12 noon ; Wednesday, 9.0 a.m.—12 noon.

#### HEALTH EDUCATION.

As regards Health Education (a very important and essential factor in the prevention of illness), it is pertinent here to emphasise that although some responsibility for this section of preventive medicine may be accepted (as has been the case) by the Local Health Authority, the permissive power of the Council as a Local Sanitary Authority to carry out measures of health education under Section 179 of the Public Health Act, 1936, is still extant and should, in my view, continue to be exercised.

#### VACCINATION AND IMMUNISATION ARRANGEMENTS.

Vaccination and immunisation against diphtheria are available to all who desire it for themselves or for their children, either through the family doctor (who undertakes it at his home or at his surgery as part of his duties to the patient) or, on request, by appointment. Such services may be obtained at one of the immunisation sessions which are held at approximately monthly intervals in schools at Great Sankey, Penketh and Padgate. Immunisation of infants and small children is also undertaken—when circumstances warrant—at the Child Welfare Centres at Burtonwood, Winwick, Croft and Woolston.

The position in regard to diphtheria immunisation, and to small-pox vaccination, shows virtually no improvement. Despite the added attraction of the practicability nowadays of protecting small infants and young children, not only against the possible menace of diphtheria, but against whooping cough and tetanus, through the use of *only one triple-purpose antigen*, there has been no change in the proportion of children obtaining such protection (60%). Possibly this may to some extent, be influenced by the unfortunate publicity which has been given to the association between immunisation and the “provocation” of poliomyelitis of the paralytic type ; but in my view it is simply the result of parental indifference and apathy which springs from failure to appreciate diphtheria as it used to present itself a generation ago. Much the same reasons, I suggest, are behind the general failure to secure protection against small-pox by vaccination.

During the year, a total of 328 children under 15 years of age completed the full course of immunisation against diphtheria of which 316 were under the age of five years. In addition to the above, 122 children all of school age, received reinforcement or “booster” injections, making a grand total of 450.

The percentage proportion of the estimated child population (under the age of 15 years) in an immunised state as at 31st December, 1957, was 60% as against a figure of 67% for the child population in No. 10 Health Division as a whole.

Only 195 children under one year of age underwent primary vaccination, of which 188 were successful, and 14 persons over the age of 15 years received primary vaccination all successful. In addition to the above, a total of 80 persons were re-vaccinated, all but three successfully.

If one deducts from the total of 526 live births in 1957 belonging to the district the 4 infant deaths in 1958 — this means that out of the 522 survivors only 195 underwent primary vaccination, or approximately one in every three babies. This low proportion can only be viewed seriously, as the figure fails to improve as the years pass, despite the efforts of doctors, nurses, health visitors, and health educationists to impress on parents the facts (1) that small-pox is still a grave potential risk in this country, and (2) that vaccination in the first year of life whilst conferring substantial immunity over many years, is virtually devoid of risk. One looks here for rather more active support from the family doctor, whose attitude to this question can make all the difference between success and failure.

### POLIOMYELITIS VACCINATION.

The programme of poliomyelitis vaccination, which commenced early in 1956, continued and was in fact extended during 1957 and 1958. Whereas in 1956 entitlement to receive the “vaccine” was confined to children born during the years 1947—1954, during 1957 this was amended to include children born during the years 1955 and 1956 : in November, 1957, a further amendment was introduced, making vaccine available to all children under 15 years of age, to expectant mothers, and to the families of general practitioners and ambulance personnel, in addition to selected groups of doctors and nursing staffs in the hospital service. Finally in September of the present year the principle of third injections was accepted and the scheme extended to persons born since the year 1933 including that year.

The following poliomyelitis “vaccinations” were carried out in the Rural District during the current year :—

Children under five years of age . . . . .	549
Children and other persons over five years of age . .	501
	<hr/>
Total . . . . .	1050
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## SECTION X.

### NATIONAL ASSISTANCE ACT, 1948.

The Local Authority carrying responsibility for the implementation of Parts III and IV of this Act is the County Council, and the administrative machinery, in this case also, is on a divisional basis. The main provisions, of Part III relate to the provision of accommodation both temporary and residential for persons who, are without lodging ; and to Welfare Services in general for persons handicapped by infirmities such as Blindness, Deafness, Dumbness, crippling physical defects, and other disabilities of a severe and permanently handicapping character.

The approved scheme of the County Council in regard to Welfare utilises very fully the services rendered by the various voluntary agencies already in existence prior to this legislation.

Section 47 of this Act prescribes the procedure whereby aged and infirm persons, if not receiving adequate care and attention in their own homes, may, by a Court Order, be removed to a suitable hospital following a hearing by the Court of evidence in support of a certificate issued by the Medical Officer of Health after close consideration of all the circumstances of the case : whilst the later Act of 1949 amends the original procedures to make it speedily effective in cases of urgency.

Section 50 is of importance in that it places on the County District Authority the duty of arranging for the burial or cremation of the body of any person who has died or been found dead within the district when "it appears to the Authority that no suitable arrangements for the disposal of the body have been or are being made otherwise than by the Authority."

No action under either of these sections has been called for during the year.

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## SECTION XI.

### THE CHILDREN ACT, 1948.

In the main, this Act provides for the care and welfare of children and young persons up to the age of 18 years who for one reason or another are deprived of normal home life, and it thus has an important bearing on the mental and physical health of such children.

The County Council, which is the Local Authority for the purposes of this Act, exercises its functions through its Children's Committee and the Children's Officer, who is responsible to the Committee for the efficient administration and day-to-day operation of the service, which is carried out on a regional or area basis.

The Warrington Rural District lies administratively within the responsibility of the Children's Officer for the Leigh area ; an area newly constituted during 1953, to which Miss J. Cole was appointed as Area Children's Officer, with offices in Leigh itself. The reorganisation within the Children's Department has made possible a closer and more effective liaison between that department and my own as Divisional Medical Officer.

Fortunately the days of serious neglect and wilful brutality have receded, but there still exists an appreciable number of cases where minor degrees of cruelty and neglect arise often as the result of indifference or simply inadequacy on the part of the parents. Such cases must give rise to concern in the minds of a number of different groups of social workers : Children's Visitors, Health Visitors, Inspectors of the N.S.P.C.C., etc.—and are not infrequently complicated by insanitary and overcrowded housing conditions, or the frank mental backwardness or defectiveness of parents and/or children. In order to integrate all viewpoints, to consider the action most appropriate and the officer in whose particular sphere of influence the probable remedy lies, regular case conferences are held (at two-monthly intervals) and are attended by representatives of both statutory authorities and voluntary agencies which have the interests and welfare of children at heart. These conferences have been most valuable in enabling effective supervisory remedial measures to be undertaken.

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